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PATENT APPLICATION FEE DETERMINATION RECORD					Application or Docket Number <span style="font-size: 1.5em;">09977246</span>	
CLAIMS AS FILED - PART I						
(Column 1)		(Column 2)		SMALL ENTITY		OR OTHER THAN SMALL ENTITY
FOR	NUMBER FILED <span style="font-size: 1.2em;">17</span>	NUMBER EXTRA		RATE	FEE	
BASIC FEE <small>(37 CFR 1.16(a))</small>					\$	
TOTAL CLAIMS <small>(37 CFR 1.16(c))</small>		17	minus 20 =	x \$	=	
INDEPENDENT CLAIMS <small>(37 CFR 1.16(b))</small>		3	minus 3 =	x	=	
MULTIPLE DEPENDENT CLAIM PRESENT <small>(37 CFR 1.16(d))</small>				+	=	
				TOTAL		OR TOTAL <span style="font-size: 1.2em;">740</span>
<small>* If the difference in column 1 is less than zero, enter "0" in column 2</small>						
CLAIMS AS AMENDED - PART II						
(Column 1)		(Column 2)		(Column 3)		
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI-TIONAL FEE
	Total <small>(37 CFR 1.16(c))</small>	*	Minus	**	=	x \$ =
	Independent <small>(37 CFR 1.16(b))</small>	*	Minus	***	=	x =
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <small>(37 CFR 1.16(d))</small>				+	=
					TOTAL	
(Column 1)		(Column 2)		(Column 3)		OR TOTAL ADDIT. FEE
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI-TIONAL FEE
	Total <small>(37 CFR 1.16(c))</small>	*	Minus	**	=	x \$ =
	Independent <small>(37 CFR 1.16(b))</small>	*	Minus	***	=	x =
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <small>(37 CFR 1.16(d))</small>				+	=
					TOTAL	
(Column 1)		(Column 2)		(Column 3)		OR TOTAL ADDIT. FEE
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI-TIONAL FEE
	Total <small>(37 CFR 1.16(c))</small>	*	Minus	**	=	x \$ =
	Independent <small>(37 CFR 1.16(b))</small>	*	Minus	***	=	x =
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <small>(37 CFR 1.16(d))</small>				+	=
					TOTAL	
(Column 1)		(Column 2)		(Column 3)		OR TOTAL ADDIT. FEE

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  
 \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".  
 \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".  
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case.  
 Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.